## 

							ī							
	in this information to the total to the tota	o identify your c												
	btor 2 buse, if filing)					_								
		tcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA	A									
	se number 23-	-		Check if this is:  An amended filing										
							ΠА	supplem	ent showin	ng postpetition ollowing date:	chapter			
	fficial Form						N	IM / DD/ \	YYYY					
S	chedule I:	Your Inc	ome								12/15			
atta	rt 1: Describe	et to this form.	r spouse is not filing wi	onal pages, write yo				imber (if	known). A	Answer every				
	information.				Debtor 1					Debtor 2 or non-filing spouse				
	If you have more attach a separate information about	page with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Employed ☐ Not employed						
	employers.	additiona.	Occupation	River Oaks  307 W Johnston Highway Norristown, PA 19401										
	Include part-time, self-employed wo		Employer's name											
	Occupation may i or homemaker, if		Employer's address											
			How long employed there?					_						
Pa	rt 2: Give De	tails About Mor	nthly Income											
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your no	n-filing			
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	n for all e	empl	oyers for	that perso	on on the li	ines below. If	you need			
							For Del	otor 1		btor 2 or ing spouse				
2.			ry, and commissions (b calculate what the monthl		2.	\$	2	,426.66	\$	N/A				
3.	3. Estimate and list monthly overtime pay.				3.	+\$		0.00	+\$	N/A				
4.	Calculate gross		4.	\$	2,42	26.66	\$	N/A	İ					

2,426.66

Debt	or 1	Tracey Martin	_		Case n	umber (if k	nown)	23-1	3538		
					For I	Debtor 1			Debtor		
	Сор	by line 4 here	4.		\$	2,420	6.66	\$	-illing 3	N/A	l
5.	l ist	all payroll deductions:									-
J.	5a.	Tax, Medicare, and Social Security deductions	5a	<b>.</b>	\$	31,	1.99	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$—		0.00	\$_		N/A	-
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	\$		N/A	-
	5e.	Insurance	5e	€.	\$	(	0.00	\$		N/A	-
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	
	5g.	Union dues	5g		\$		0.00	\$_		N/A	-
	5h.	Other deductions. Specify:	_	1.+	\$			+ \$		N/A	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		4.99	\$		N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,11	1.67	\$_		N/A	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•						
	01	monthly net income.	88		\$	1,98		\$_		N/A	-
	8b. 8c.	Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent	8b	).	\$		0.00	\$		N/A	-
	8d.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80 80		\$		0.00 0.00	\$ \$		N/A N/A	-
	8e.	Social Security	8e	€.	\$		0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$		0.00	\$		N/A	-
	8g. 8h.	Pension or retirement income	89	]. 1.+	\$		0.00	+ \$-		N/A	-
	OII.	Other monthly income. Specify: 2023 Tax Refund pro rata Contrbibution from daughter	01	1.+	<sup>ф</sup> —		3.00 0.00	* <sub>\$</sub> -		N/A N/A	
		Contribution from daughter	_	_	Ψ	130	J.00	Ψ_		IV/A	- ¬
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	L	\$	2,40	1.33	\$		N/A	<u> </u>
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	4	,513.00	+ \$		N/A	= \$	4,513.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				•					•
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00										
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies							. 12.	\$	4,513.00
										Combin	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	1?							Ontill	, moonie
		Yes. Explain: Debtor has a partnership with her sister. Debtor	clea	nr	s par	t-time.					

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